

Laucks^{Since 1908}

Testing Laboratories, Inc.

940 South Harney St., Seattle, WA 98108 (206) 767-5060 FAX (206) 767-5063

Chemistry, Microbiology, and Technical Services

CLIENT: Holland America Line, Inc
Environmental Compliance Prog
300 Elliott Avenue West
Seattle, WA 98119
ATTN : Dan Grabb

Certificate of Analysis

Work Order# : 04-06-289
DATE RECEIVED : 06/19/04
DATE OF REPORT: 07/06/04

Work ID : Monthly Analysis
Taken By : Anh Ho
Transported by: Anh Ho
Type : water

SAMPLE IDENTIFICATION:

	<u>Sample</u> <u>Description</u>	<u>Collection</u> <u>Date</u>		<u>Sample</u> <u>Description</u>	<u>Collection</u> <u>Date</u>
01	Gray Water	06/19/04 13:12	02	Black water	06/19/04 13:25

KEY:

< indicates "less than"

FLAGGING:

The flag "U" indicates the analyte of interest was not detected, to the limit of detection indicated.

This report is submitted for the exclusive use of the person, partnership, or corporation to whom it is addressed. Subsequent use of the name of this company or any member of its staff in connection with the advertising or sale of any product or process will be granted only on contract. This company accepts no responsibility except for the due performance of inspection and/or analysis in good faith and according to the rules of the trade and of science.

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Chemistry, Microbiology, and Technical Services

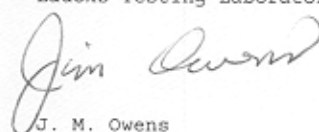
CLIENT : Holland America Line, Inc

Certificate of Analysis

Work Order# : 04-06-289

Unless otherwise instructed all samples will be discarded on 08/25/04
with the exception of samples which are consumed during the
analysis, such as microbiological samples.

Respectfully submitted,
Laucks Testing Laboratories, Inc.


J. M. Owens

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Certificate of Analysis

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TESTS PERFORMED AND RESULTS:

Analyte	Units	<u>01</u>	<u>02</u>
Biochemical Oxygen Demand	mg/L	39.	5. U
Chlorine, Total Residual	mg/L	0.1 U	0.1 U
Coliforms, fecal	MPN/100 ml	17	< 2
Total Suspended Solids	mg/L	2.	3.
pH	gl elec @25C	6.7	7.6

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PAGE OF

Laucks

COMPANY: Holland America
ADDRESS: 300 Elliott Ave. W
Seattle, WA 98119

WORK ORDER ID# 04-06-289

SUBMITTED AT:

Testing Laboratories, Inc.
940 South Henry St., Seattle, WA 98108 (206) 767-5060 FAX 767-5063
1106 Leetworth Ave., Yakima, WA 98902 (509) 248-4695 FAX 452-1265

ATTENTION:

Dan Grabb

PROJECT NAME:

monthly analysis

PROJECT CONTACT:

Dan Grabb

TELEPHONE: 206-301-5316 FAX:

JOB/P.O. NO.:

SAMPLE ID / LOCATION

DATE

TIME

1 Gray water
2 Black water

6/19

1:12pm

W

3

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

MATRIX: WATER, SOIL OR SPECIFY

NO. OF CONTAINERS

PH

BOD

TSS

R. Chlorine field

Fecal Coliform

OBSERVATIONS,
COMMENTS, SPECIAL
INSTRUCTIONS

RCU = 0 mg/L/15
RCI = 0

1

3

A. A standard turnaround time is assumed unless otherwise marked.

B. The laboratory may not be responsible for missed holding time for samples received with less than 50% of the analytical hold time remaining. Please contact the laboratory for further information.

INSTRUCTIONS

* BILLING INFORMATION, IF DIFFERENT THAN ABOVE

NAME

ADDRESS

* RUSH TURNAROUND IS
SUBJECT TO PRIOR
LABORATORY APPROVAL

TOTAL NO. OF CONTAINERS

1. USE ONE LINE PER SAMPLE.
2. BE SPECIFIC IN TEST REQUESTS.
3. CHECK OFF TESTS TO BE PERFORMED
FOR EACH SAMPLE.

ATTN:

CITY, STATE, ZIP

TURNAROUND REQUEST

* STD. 10-14 WORKING DAYS

RELINQUISHED BY (SIGN AND PRINT)

DATE

TIME

RECEIVED BY (SIGN AND PRINT)

DATE

TIME

DATE

TIME

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